

HOUSE RESOLUTION No. ____

Introduced by: Crawford

A HOUSE RESOLUTION urging the Legislative Council to assign issues surrounding kidney dialysis to interim study.

Whereas, dialysis is a life sustaining treatment that removes waste, salts and fluids from the body and is required when an individual's kidneys are not capable of performing this function; and,

Whereas, there are 127 dialysis facilities in Indiana, which currently treat nearly seven thousand Hoosiers who suffer from kidney failure; and,

Whereas, dialysis patients spend an average of 3 hours a day on 3 days a week undergoing dialysis treatment; and,

Whereas, empirically based research reveals that there are increasing incidents where the safety and quality of dialysis centers in the United States threaten the lives of the people who



receive such services; and,

Whereas, the quality of dialysis care in the United States lags behind many industrialized nations; and,

Whereas, dialysis care offered in other developed countries is less costly and results in fewer losses of life; and,

Whereas, Indiana is ranked 45 of 50 states based on the percentage of Medicare patients who receive successful dialysis treatments indicated by adequate removal of waste from their blood; and,

Whereas, 17% of Indiana Medicare patients have high hemoglobin values, putting them at risk for strokes, heart attacks, and heart disease; and,

Whereas, 3% of Indiana Medicare patients have low hemoglobin values, putting them at risk for anemia and need for red blood cell transfusions; and,

Whereas, national studies show that the number of persons experiencing Chronic Kidney Disease has risen from one in ten to one in every seven or eight people older than age of 20; and,

Whereas, the annual cost for dialysis, according to 2008 data from the United States Renal Data System ranges from \$53,000 per patient for peritoneal dialysis to \$72,000 per patient for hemodialysis; and,

Whereas, the Federal government has established the Renal Network System to regulate and monitor dialysis care; and,

Whereas, Indiana State Board of Health performs survey inspections of Indiana's dialysis centers, subject to guidelines and available funding from the Centers for Medicare and Medicaid Services; and,

Whereas, the federal government spends more than \$20 billion annually for dialysis treatment; and,



Whereas, the dialysis care industry in the United States yields a \$2 billion annual profit to corporations providing the services; and,

Whereas, the continuing consolidation of dialysis centers under two national dialysis providers creates concerns about affordability and access to this life-saving treatment; and,

Whereas, the Interim Study Committee on Dialysis Coverage of 2008 issued recommendations primarily related to benefits, billing and contract disputes; and,

Whereas, the federal government has agreed, based on encouragement by United States Senator Chuck Grassley to address the growing national concern about quality and cost of dialysis treatment: Therefore,

Be it resolved by the House of Representatives of the
General Assembly of the State of Indiana:

SECTION 1. That the Indiana House of Representatives seriously endeavors to meet a sustained goal of improving the safety and quality of dialysis centers for Hoosiers and establishes an Interim Study Committee on Dialysis Treatment, Oversight, and Quality of Care to review and make recommendations about:

" The sufficiency of the state survey process as determined by the Centers for Medicare and Medicaid Services in terms of oversight

" The safety and quality of care provided to Indiana's dialysis community

" Whether the current practices in the provision of dialysis care contributes to health disparities in health outcomes for Indiana residents

" The access of dialysis care to Hoosiers in need around the state

" Issues related to dialysis center owners and operators in Indiana

" The sufficiency of the state's interface with Federal officials regarding the oversight of dialysis center

